


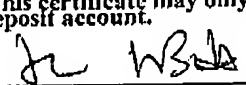
FEB 07 2006

<b>TRANSMITTAL OF INFORMATION DISCLOSURE STATEMENT</b> (Under 37 CFR 1.97(b) or 1.97(c))					Docket No. <b>WEBE-0004</b>	
In Re Application Of: <b>Helm et al.</b>						
Application No. <b>10/535,019</b>	Filing Date <b>10/31/2005</b>	Examiner	Customer No. <b>23550</b>	Group Art Unit <b>2831</b>	Confirmation No. <b>2036</b>	
Title: <b>HOUSING FOR RECEIVING AN ELECTRICAL DEVICE</b>						
Address to: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450						
<b>37 CFR 1.97(b)</b>						
1. <input checked="" type="checkbox"/> The Information Disclosure Statement submitted herewith is being filed within three months of the filing of a national application other than a continued prosecution application under 37 CFR 1.53(d); within three months of the date of entry of the national stage as set forth in 37 CFR 1.491 in an international application; before the mailing of a first Office Action on the merits, or before the mailing of a first Office Action after the filing of a request for continued examination under 37 CFR 1.114.						
<b>37 CFR 1.97(c)</b>						
2. <input type="checkbox"/> The Information Disclosure Statement submitted herewith is being filed after the period specified in 37 CFR 1.97(b), provided that the Information Disclosure Statement is filed before the mailing date of a Final Action under 37 CFR 1.113, a Notice of Allowance under 37 CFR 1.311, or an Action that otherwise closes prosecution in the application, and is accompanied by one of:						
<input type="checkbox"/> the statement specified in 37 CFR 1.97(e);						
<b>OR</b>						
<input type="checkbox"/> the fee set forth in 37 CFR 1.17(p).						

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10/535,019	10/31/2005		23550	2831	2036	
Title: HOUSING FOR RECEIVING AN ELECTRICAL DEVICE						
<b>Payment of Fee</b> (Only complete if Applicant elects to pay the fee set forth in 37 CFR 1.17(p))						
<input type="checkbox"/> A check in the amount of _____ is attached. <input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>500999</u> as described below. <div style="margin-left: 40px;"> <input type="checkbox"/> Charge the amount of _____  <input checked="" type="checkbox"/> Credit any overpayment.  <input checked="" type="checkbox"/> Charge any additional fee required.         </div> <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.						
<b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b>						
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Substitute for form 1449A/PTO				<b>Complete If Known</b>	
<b>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</b>  (use as many sheets as necessary)				Application Number	10/535,019
				Filing Date	10/31/2005
				First Named Inventor	Helm et al.
				Art Unit	2831
				Examiner Name	
Sheet	1	of	1	Attorney Docket Number	WEBE-0004

U.S. PATENT DOCUMENTS					
Examiner Initials*	Cite No. <sup>1</sup>	Document Number	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Number-Kind Code <sup>2</sup> (if known)			
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FOREIGN PATENT DOCUMENTS						
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		Country Code <sup>3</sup> -Number <sup>4</sup> -Kind Code <sup>5</sup> (if known)				
		FR2643640 Replacement for incomplete reference filed 12 May 2005 (last 2 pages were missing).	08/31/1990			

Examiner Signature		Date Considered	
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